

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

MR: Juan R. Serrano # 07-A-1746
Waish Mohawk Correctional Facility

(In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

USDS SDNY
DOCUMENT
ELECTRONICALLY FILED
DOC #: 5-1-08
DATE FILED: 5-1-08

Civ. 1:07 (ev) (08839) V1

- against -

The hold medical Department ect
est. MS: Michael Maher Superintendent
MS: Judy Antonson Nurse ministrators
Doctors Zaki and Sharma ect ect.

(In the space above enter the full name(s) of the defendant(s)/respondent(s).)

AFFIRMATION OF SERVICE

I, MR: Juan R. Serrano, declare under penalty of perjury that I have
(name) served a copy of the attached MS: Carmen Serrano
(document you are serving)
upon MS: Carmen Serrano whose address is 426 West
(name of person served) 27 Drive N.Y. N.Y. 10007 A-P-T. 6-G
(where you served document)
by Don't know what to say. She is my sister
(how you served document: For example - personal delivery, mail, overnight express, etc.)

Dated: Rome, N.Y.
(town/city) (state)
April 26, 2008
(month) (day) (year)

Swear to before me
THIS 26 APRIL 2008

John C. Boyea
Notary Public, State of New York
No. #01BO6073073
Qualified in Oneida County
Commission Expires: 04/15/2010

Juan R. Serrano
Signature

Mohawk Correctional Facility
Address 1600 School Road
P.O. Box 8451

City, State

Rome N.Y. 13442-8451
Zip Code

Non
Telephone Number

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

Mr. Juan R. Serrano # 07-A-1746
Waich Mohawk Correctional Facility
 (In the space above enter the full name(s) of the plaintiff(s)/petitioner(s).)

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The hold medical Department ect, ect.
ect. MS: Michael Mather Superintendent
MS: Judy Antonson Nurse ministrater
Doctors Zaki and Sharma ect, ect.
 (In the space above enter the full name(s) of the defendant(s)/respondent(s).)

**REQUEST TO PROCEED
IN FORMA PAUPERIS
ON APPEAL**

I, Mr. Juan R. Serrano, (print or type your name) am the plaintiff/petitioner in the above entitled case and I hereby request to proceed *in forma pauperis* on appeal and without being required to prepay fees or costs or give security. I state that because of my poverty I am unable to pay the costs of said proceeding or to give security therefor, and that I believe I am entitled to redress.

The issues I desire to present on appeal are the following: Mentally and physically
evil medical health mistreatments . At Waich
mohawk Correction Facility . Inmates Inpatation
Infermery . By doctors, Nurses, Officers, ect ect.
One big happy famaliy - So all staff members
state so .

1. If you are presently employed:

- give the name and address of your employer
- state the amount of your earnings per month

Not employed
No !

2. If you are NOT PRESENTLY EMPLOYED:

- state the date of start and termination of your last employment
- state your earnings per month

YOU MUST ANSWER THIS QUESTION EVEN IF YOU ARE INCARCERATED.

No !

No !

3. Have you received, within the past twelve months, any money from any source? If so, name the source and the amount of money you received.

No !!

a) Are you receiving any public benefits? No. Yes, \$ _____.

b) Do you receive any income from any other source? No. Yes, \$ _____.

4. Do you have any money, including any money in a checking or savings account? If so, how much?

No. Yes, \$ _____.

No !!

5. Do you own any apartment, house, or building, stock, bonds, notes, automobiles or other property? If the answer is yes, describe the property and state its approximate value.

No. Yes, \$ _____.

No !!

6. Do you pay for rent or for a mortgage? If so, how much each month?

No. Yes, _____.

No !!

7. List the person(s) that you pay money to support and the amount you pay each month.

No - one !!

No !!

8. State any special financial circumstances which the Court should consider.

Some of these people need to be in prison
or place out of their jobs I go to the hospital as
soon as I can, and get transfer to another facility
And a mental and physical Law - sout against
these people as well.

I understand that a false statement or answer to any question in this declaration shall subject me to the penalties for perjury.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 24 date day of 04 month, 2008 year



James J. Egan
Signature

Let the applicant proceed on appeal without prepayment of cost or fees or the necessity of giving security therefor.



Victor Marrero
United States District Judge

DATED: 1 May, 2008
New York, New York

Rev. 07/2007